

MULTIPLE DEPEN CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

01573458

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1							51						
2		1						52						
3	1							53						
4		1						54						
5	1							55						
6		2						56						
7	1							57						
8		2						58						
9	2							59						
10		2						60						
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45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	2													
TOTAL DEP.	12													
TOTAL CLAIMS	14													